

AMENDED AS TO CASE NUMBER

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JIS Code: RCC

<b>STATE OF MICHIGAN</b> JUDICIAL DISTRICT Third JUDICIAL CIRCUIT COUNTY PROBATE	<b>REPORTER/RECORDER CERTIFICATE OF ORDERING OF TRANSCRIPT ON APPEAL</b> Appeal to: <input checked="" type="checkbox"/> Court of Appeals <input type="checkbox"/> Circuit	<b>CASE NO.</b> 08-019011-01
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Court address

1441 St. Antoine, Detroit, MI 48226

Court telephone no.

313-224-7101

Plaintiff/Petitioner name(s) and address(es) ☐ Appellant ☐ Appellee  
 State of Michigan

v

Defendant/Respondent name(s) and address(es) ☐ Appellant ☐ Appellee  
 Mary Diane Bukowski  
 9000 E. Jefferson  
 Apt. 10-9  
 Detroit, MI 48214

Attorney, bar no., address, and telephone no.  
 Wayne County Prosecutor's Office  
 1441 St. Antoine, 12th Floor  
 Detroit, MI 48226  
 313-224-5777

Attorney, bar no., address, and telephone no.  
 John F. Royal, P27800  
 615 Griswold, Suite 1724  
 Detroit, MI 48226  
 313-962-3738

☐ Probate In the matter of \_\_\_\_\_

This certificate must be filed by the appellant or the reporter/recorder within 7 days on appeals to the Court of Appeals.  
 This certificate must be filed by the appellant within 7 days on appeals to the circuit court.

I am a certified court reporter/recorder for the court designated above and I certify that:

- On August 18, 2009 ☐ a portion of the ☒ the complete transcript of proceedings, taken in this case  
 Date before Judge Michael Hathaway on 4-27, 28, 30, 2009, was ordered by  
1-9-09, 2-20-09, 3-19-09, 4-17-09, 4-24-09  
☒ a. John F. Royal, attorney for Diane Bukowski  
 Attorney name (type or print) Name (type or print)  
☐ b. the appellant, \_\_\_\_\_  
 Name (type or print)  
☐ c. the court.
- ☐ 2. Payment has been secured and the transcript will be furnished by me on \_\_\_\_\_  
 Estimated number of pages is \_\_\_\_\_ Estimated date of completion \_\_\_\_\_
- ☒ 3. The transcript has been filed with the court and furnished as requested. Date filed: August 18, 2009
- ☐ 4. There is no record to be transcribed.

August 18, 2009  
 Date

Rochelle Waldrip  
 Reporter/Recorder signature  
 Name (type or print)

CSR 1299  
 Certification designation and number  
1441 St. Antoine  
 Business address  
Detroit, MI 48226 313-224-7101  
 City, state, zip Telephone no.

List names, certification designations and numbers, and dates of each proceeding of each reporter or recorder who reported or recorded or transcribed any part of the proceedings: